

*Mid- Atlantic Association of Shrine Motor Corps*

**APPLICATION FOR MEMBERSHIP**

( Please Type or Print Plainly )

We hereby make application for membership in the Mid-Atlantic Association of Shrine Motor Corps and agree to abide by the Rules, Regulations and Bylaws of said Organization.

**NAME OF TEMPE:** \_\_\_\_\_

**NAME OF UNIT:** \_\_\_\_\_

**NUMBER OF MEMBERS ON ROSTER:** \_\_\_\_\_

Please list in alphabetical order the name of each member, their mailing address, zip code number, and e-mail address if any.

**NAME AND RANK OF OFFICERS:**

1. \_\_\_\_\_ 4. \_\_\_\_\_

2. \_\_\_\_\_ 5. \_\_\_\_\_

3. \_\_\_\_\_ 6. \_\_\_\_\_

Enclose Fee of Twelve Dollars (\$12.00) per member listed, which will pay the first years dues. The dues for active and non-riding members are the same. Make checks payable to;

MID-ATLANTIC ASSOCIATION OF SHRINE MOTOR CORPS, AND MAIL TO:

Dale Zimmerman

52 Racehorse Dr.

Jonestown, PA 17038

(H) (717) 865-0281

[MAASMC@comcast.net](mailto:MAASMC@comcast.net)

Upon Receipt of your check, a certificate for your unit will be mailed along with the individual membership cards.

**APPROVED BY:**

Potentate: \_\_\_\_\_ Temple: \_\_\_\_\_